

PTO/SB/81 (11/08)

Approved for use through 11/30/2011. EMB 0251 J003
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	08/216,440
	Filing Date	March 23, 1994
	First Named Inventor	Yiqing, Zhen
	Title	ANTIMALARIAL COMPOSITIONS
	Art Unit	1614
	Examiner Name	Jordan, Kimberly R.
	Attorney Docket Number	18634-US-CNT2

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my agent(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

01095

OR

☐ I hereby appoint Practitioner(s) named below as my agent(s) or agent(s) to prosecute the application identified above and to transact all business in the United States Patent and Trademark Office connected therewith.

Practitioner(s) Name

Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number

OR

☐ The address associated with Customer Number.

OR

☐ Firm or Individual Name

Address

City

Country

Telephone

Fax

☐ Applicant, inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 2.71☒ Statement under 37 CFR 3.73(b) (Form PTO/SB/81) submitted herewith is filed on:

SIGNATURE of Applicant or Assignee of Record

Signature

Name

CAO, Wuchun/Jennifer Chapman

Title

Telephone

862 778-1202

Title and Company

Institute of Microbiology and Epidemiology, Academy of
Military Medical Sciences/Novartis AG

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required. See below.

☒ Total of 1 forms are submitted.

This section of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain a return of a copy of the application which is to be filed by the USPTO to process an application. Consideration is given to 35 U.S.C. 122 and 37 CFR 1.1 and 1.2. This section is not required to take a further step to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There are very few exceptions to this rule. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-5190 and select option 2.